



Docket No.: 1405.1037

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of:

Minoru SAITO, et al.

Serial No. 09/804,038

Group Art Unit: 3626

Confirmation No. 8843

Filed: March 13, 2001

Examiner: Michael Tomaszewski

For: HEALTH CARE INFORMATION SYSTEM

AMENDMENT

Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

Sir:

This is in response to the Office Action mailed August 3, 2005, and having a period for response set to expire on November 3, 2005. A Petition for a one-month extension of time, together with the requisite fee for same, is submitted herewith, thereby extending the period for response to December 5, 2005 (Monday).

The following amendments and remarks are respectfully submitted. Reconsideration of the claims is respectfully requested.

12/06/2005 SZEWDIE1 00000165 09804038

01 FC:1251

120.00 OP



S&H Form: (02/05)

**REPLY/AMENDMENT
FEE TRANSMITTAL**

Attorney Docket No. 1405.1037
Application Number 09/804,038
Filing Date March 13, 2001
First Named Inventor Minoru SAITO, et al.
Group Art Unit 2161

AMOUNT ENCLOSED

120.00

Examiner Name

Michael Tomaszewski

FEE CALCULATION (fees effective 12/08/04)

CLAIMS AS AMENDED	Claims Remaining After Amendment	Highest Number Previously Paid For	Number Extra	Rate	Calculations
TOTAL CLAIMS	7	- 20 =	0	X \$ 50.00 =	\$ 0.00
INDEPENDENT CLAIMS	3	- 3 =	0	X \$ 200.00 =	0.00
Since an Official Action set an <u>original</u> due date of <u>November 3, 2005</u> , petition is hereby made for an extension to cover the date this reply is filed for which the requisite fee is enclosed (1 month (\$120)); (2 months (\$450)); (3 months (\$1,020)); (4 months (\$1,590)); (5 months (\$2,160)):					120
If Notice of Appeal is enclosed, add (\$500.00)					
If Statutory Disclaimer under Rule 20(d) is enclosed, add fee (\$130.00)					
Information Disclosure Statement (Rule 1.17(p)) (\$180.00)					
Total of above Calculations =					\$ 120.00
Reduction by 50% for filing by small entity (37 CFR 1.9, 1.27 & 1.28)					
TOTAL FEES DUE =					\$ 120.00

(1) If entry (1) is less than entry (2), entry (3) is "0".

(2) If entry (2) is less than 20, change entry (2) to "20".

(4) If entry (4) is less than entry (5), entry (6) is "0".

(5) If entry (5) is less than 3, change entry (5) to "3".

METHOD OF PAYMENT

- ☐ Check enclosed as payment.
☐ Charge "TOTAL FEES DUE" to the Deposit Account No. below.
☒ No payment is enclosed.

GENERAL AUTHORIZATION

- ☒ If the above-noted "AMOUNT ENCLOSED" is not correct, the Commissioner is hereby authorized to credit any overpayment or charge any additional fees necessary to:
- Deposit Account No. 19-3935
Deposit Account Name STAAS & HALSEY LLP
- ☒ The Commissioner is also authorized to credit any overpayments or charge any additional fees required under 37 CFR 1.16 (filing fees) or 37 CFR 1.17 (processing fees) during the prosecution of this application, including any related application(s) claiming benefit hereof pursuant to 35 USC § 120 (e.g., continuations/divisionals/CIPs under 37 CFR 1.53(b) and/or continuations/divisionals/CPAs under 37 CFR 1.53(d)) to maintain pendency hereof or of any such related application.

SUBMITTED BY: STAAS & HALSEY LLP

Typed Name Thomas E. McKiernan

Reg. No. 37,889

Signature

Date

050005

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